PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

CURRENT CORRESPOND					r domestic mailings of the			
	DAD	Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
27890 7590 0228/2011 STEPTOE & JOHNSON LLP 1330 CONNECTICUT AVENUE, N.W. WASHINGTON, DC 20036				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
				ishinted to die out 1	0 (3/1)2/	5 2005, on the th	(Depositor's name)	
			<u> </u>		-		(Signature)	
							(Date)	
APPLICATION NO. FILING DATE		T	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/632,922 08/04/2003		Moungi G. Bawendi		14952.0274 C1 D1/MIT 4946				
TITLE OF INVENTION	: INVENTORY CONT	ROL	·		;	3096		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0		\$1810	05/31/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS]				
STEELE,	AMBER D	1639	250-372000					
1. Change of corresponde CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the			Steptoe	& Johnson LLP	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternati	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Tree Address" ind	ication (or "Fee Address 2 or more recent) attach	" Indication form	registered attorney or agent) and the names of up to					
	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	ne)				
			4 ,	• *	e is identif	ied below, the de	ocument has been filed for	
(A) NAME OF ASSIG		_	NCE: (CITY and STATE OR COUNTRY)					
Massachusetts	s Institute of Tech	nology	Cambridge, N	Massachusetts				
Please check the appropr	iate assignee category or	categories (will not be	printed on the patent):	Individual 🗸 Cor	rporation or	other private gro	oup entity Government	
4a. The following fee(s)	are submitted:		4b. Payment of Fee(s): (Plea	ase first reapply any	v previous	v paid issue fee	shown above)	
✓ Issue Fee			A check is enclosed.				,	
	o small entity discount p	permitted)	Payment by credit car			15 ()	· .	
Advance Order - #	of Copies		The Director is hereby overpayment, to Depo	y authorized to charg osit Account Number	19-429	red fee(s), any de (enclose a	n extra copy of this form).	
5. Change in Entity Stat						a 25 cv	TR 1 07() (0)	
	SMALL ENTITY statu		b. Applicant is no longed from anyone other than					
interest as shown by the r	ecords of the United Sta	ites Patent and Tradema	rk Office.					
Authorized Signature	26) 	Date 4~ 8	5-11			
Typed or printed name Harold H. Fox			·	Registration No	41.49	8		

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.